



MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

(For use with Form PTO/SB/06)

Application Number

Applicant(s)

Filing Date

10/755,624

1/12/2004

KEVIN KAWAKITA

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1	X						51					
2		X					52					
3		X					53					
4		X					54					
5		X					55					
6		X					56					
7		X					57					
8		X					58					
9		X					59					
10		X					60					
11		X					61					
12		X					62					
13		X					63					
14		X					64					
15		X					65					
16		X					66					
17		X					67					
18		X					68					
19		X					69					
20		X					70					
21		X					71					
22		X					72					
23		X					73					
24		X					74					
25		X					75					
26		X					76					
27		X					77					
28		X					78					
29	X	X					79					
30		X					80					
31		X					81					
32	X	X					82					
33		X					83					
34		X					84					
35	X	X					85					
36		X					86					
37		X					87					
38							88					
39							89					
40							90					
41							91					
42							92					
43							93					
44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
Total Indep							Total Indep					
Total Depend							Total Depend					
Total Claims							Total Claims					

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.